

# ● PRINTER RUSH ●

(PTO ASSISTANCE)

Application : <u>10/725721</u>	Examiner : <u>Hirshfeld</u>	GAU : <u>2854</u>
From : <u>J. Black</u>	Location : <u>(IDC) FMF FDC</u>	Date : <u>6/3/05</u>
Tracking # : <u>epm 10/725721</u> Week Date : <u>5/2/05</u>		

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449		<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS		<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	<u>2/11/05</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW		<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW		<input type="checkbox"/> Other
<input type="checkbox"/> DRW		
<input type="checkbox"/> OATH		
<input type="checkbox"/> 312		
<input type="checkbox"/> SPEC		

**[RUSH] MESSAGE:**

Original claim 3 depends on canceled claim 1.

Please resolve.

**[XRUSH] RESPONSE:**

Dependency was corrected by

a supplemental examiner's amendment.

Andrew H. Hirshfeld

ANDREW H. HIRSHFELD  
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NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.  
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